



Appendix 10
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Appendix 11

**Participation in national committees
as an information specialist**

The AIHW is a member, as an information specialist, of the committees below. Additional roles (Chair and/ or secretariat) are indicated in parentheses.

Advisory Committee on Australian and International Disability Data (replaces DDRAG) (secretariat)

Advisory Committee on Maternal Mortality and Morbidity

Australasian Association of Cancer Registries (secretariat)

Australian Screening Advisory Committee and its working groups

Commonwealth–State Housing Agreement National Housing Data Agreement Management Group (member and secretariat)

Commonwealth–State Housing Agreement National Housing Data Agreement National Housing Data Development Committee (chair, secretariat and member)

Commonwealth–State/Territory Disability Agreement National Minimum Data Set Network (secretariat and member)

Computer Assisted Telephone Interview Technical Reference Group

Demographic Statistics Advisory Group (ABS)

Health Data Standards Committee (Chair and secretariat)

Health Statistics Advisory Group (ABS)

Intergovernmental Committee on Drugs, Alcohol and Other Drug Treatment Services National Minimum Data Set Working Group (secretariat)

Juvenile Justice Data Sub–Committee (secretariat and member)

Medical Indemnity Data Working Group (secretariat)

National Advisory Group on Aboriginal and Torres Strait Islander Health Information and Data (secretariat)

National Arthritis and Musculoskeletal Conditions Advisory Group — data working group (secretariat)

National Birth Anomalies Steering Committee

National Bowel Screening Implementation Advisory Group

National Burden of Disease Advisory Committee

National Child Protection and Support Services Data Group (secretariat)

National Community Services Data Committee (secretariat and member)

National Community Services Information Management Group (Deputy Chair, secretariat and member)

National Diabetes Data Working Group (secretariat)

National Diabetes Strategies Group

National Health Information Group

National Health Performance Committee

National Heart, Stroke and Vascular Health Data Working Group (secretariat)

National Heart, Stroke and Vascular Health Strategies Group

National Indigenous Housing Information Implementation Committee (secretariat and member)

National Mental Health Working Group Information Strategy Committee (Chair of NMDS subcommittee)

National Perinatal Data Development Committee

National Prisoner Health Information Group (co-secretariat with SA)

National Prisoner Health Technical Expert Group

National Public Health Information Working Group (co-Chair and secretariat)

National Opioid Pharmacotherapy Statistics Annual Data Working Group (secretariat)

Population Health Taskforce on Performance

Safety Monitoring Committee for the NHMRC Guidelines for the Management of Asymptomatic Women with Screen Detected Cervical Anomalies

Standards Australia Health Informatics Committee (IT-014)

Statistical Information Management Committee (Deputy Chair and secretariat)
(Working Groups of the Australian Screening Advisory Committee)

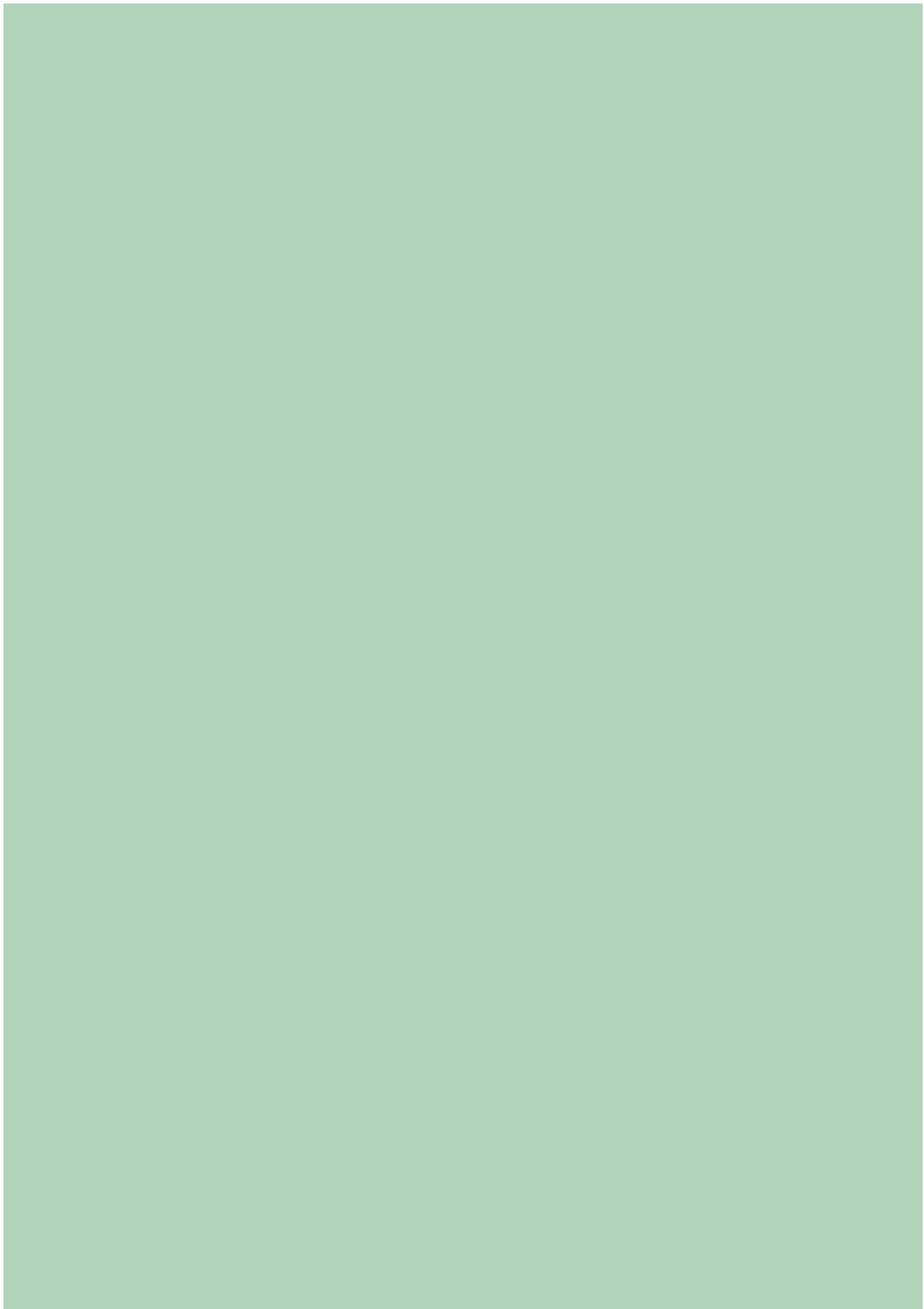
- Monitoring and Evaluation Working Group
- NHMRC Cervical Guidelines Working Group
- Policy Review and New Technologies Working Group

International

OECD Health Data Correspondence (Group)

OECD Health Care Quality Indicators (Project)

World Health Organization Family of International Classifications (WHO-FIC) Heads of Collaborating Centres





Appendix 12

**AIHW Charter of Corporate
Governance**

INTRODUCTION

The Australian Institute of Health and Welfare (AIHW) exists to describe the Australian health and welfare systems. Reflecting the scope of those systems, the operating environment of the Board, created by legislation (the *Australian Institute of Health and Welfare Act 1987* — AIHW Act) is complex.

The AIHW is an Australian Government statutory authority within the Health and Ageing portfolio, reporting direct to the portfolio Minister. The AIHW is defined as a body corporate subject to the *Commonwealth Authorities and Companies Act 1997* (CAC Act). As provided for by the AIHW Act, management of AIHW affairs is delegated to the Director.

The AIHW Charter of Corporate Governance provides guidance for members and potential members of the AIHW Board to ensure the AIHW operates effectively as an independent agency of government. It defines the roles and responsibilities of individual members, and provides guiding principles to support members through the range of operational and legal issues they encounter in their direction of the AIHW.

PURPOSE

The Charter outlines the framework for corporate governance of the AIHW.

As a statutory authority of the Australian Government, the AIHW must take into account relevant governing laws. A clear set of instructions and processes outlining the Board's responsibilities is designed to enable the Board to work effectively within its legislative requirements and in response to the requirements of the organisation. This paper outlines the corporate governance responsibilities of the Board and the structures established to support it.

AIHW'S MISSION AND VALUES

The AIHW is guided in all its undertakings by its mission and values.

AIHW mission

Better health and wellbeing for Australians through better health and welfare statistics and information.

We inform community discussion and decision making through national leadership and collaboration in developing and providing health and welfare statistics and information.

Values

Accessibility	making our work available to all Australians
Expertise	applying specialised knowledge and high standards to our products and services
Independence	ensuring our work is objective, impartial and reflects our mission
Innovation	showing curiosity, creativity and resourcefulness in our work
Privacy	respecting and safeguarding the privacy of individuals and the confidentiality of those who provide the information we use
Responsiveness	seeking and responding to the needs of all those who supply or use our data and information

ROLES, POWERS AND RESPONSIBILITIES

1. Governing laws

Enabling legislation

The AIHW was established as a statutory authority in 1987 by the then *Australian Institute of Health Act 1987*. In 1992 the AIHW's role and functions were expanded to include welfare-related information and statistics. The Act is now entitled the *Australian Institute of Health and Welfare Act 1987*.

Under the AIHW Act, AIHW Board members are collectively also referred to as the Institute.

The Board may appoint committees as it thinks fit to assist it in performing its functions (section 16).

As a statutory authority, the AIHW is defined in its Act as a body corporate subject to the CAC Act. Members are subject to legislation that specifies their duties and responsibilities under the CAC Act.

Responsible Minister

The Minister for Health and Ageing is the Minister responsible for the AIHW, which is, therefore, an agency within the Health and Ageing portfolio.

2. Constitution

Section 8(1) of the AIHW Act specifies the constitution of the Board.

The following members are appointed for a term of three years, by the Governor General on the advice of the Minister:

- ♦ a chairperson
- ♦ a member nominated by the Australian Health Minister's Advisory Council;
- ♦ a member nominated by the Community Services Minister's Advisory Council
- ♦ a representative of the Housing Ministers' Advisory Council
- ♦ three members nominated by the Minister
- ♦ a person nominated by the Minister who has knowledge of the needs of consumers of health services
- ♦ a person nominated by the Minister who has knowledge of the needs of consumers of welfare services
- ♦ a person nominated by the Minister who has knowledge of the needs of consumers of housing assistance services
- ♦ a person nominated by the Minister who has expertise in research into public health issues.

Board members holding office by virtue of the position they hold (therefore not appointed) are:

- ♦ the Director
- ♦ the Australian Statistician
- ♦ the Secretary of the Department of Health and Ageing (DoHA)

The Australian Bureau of Statistics (ABS) and DoHA members may formally designate a representative to attend meetings on their behalf.

A member of staff of the AIHW is also a member of the Board. The member is appointed annually through a staff ballot. This position is independent of the official appointment process.

Note: The Secretary of the Department of Family and Community Services and the Chief Executive Officer, National Health and Medical Research Council or their nominees, attend and participate as observers with the agreement of the Board.

Board members who are Commonwealth or state/territory officers (other than the Director and staff member) are referred to in this document as departmental representatives.

3. Conduct of Board members

Because the AIHW is a statutory authority, the conduct of members of the AIHW Board is prescribed by the CAC Act. Members are bound by the Conduct of Directors, specified in the Act. (See appendix.)

Board members are expected to ensure that they understand their responsibilities under both the CAC and AIHW Acts, and to uphold the AIHW values.

4. Roles of Board members

Key responsibilities of the AIHW are to:

- provide biennial reports to the Minister and to Parliament on Australia's health and Australia's welfare
- establish data standards for health and welfare statistics
- develop knowledge, intelligence and statistics to better inform policy makers and the community

Role of the Board

- Setting the AIHW's mission and values and its strategic goals and directions, including endorsement of the Institute's Corporate Plan and Business Plan.
- Maintaining the independence of the AIHW.
- Ensure that the AIHW complies with legislative and administrative requirements.
- Meet its statutory requirements including making recommendations to the Minister to appoint a Director of the AIHW.
- Oversee the financial viability of the AIHW.
- Endorse the Annual Report and the audited financial statements (as required by the CAC Act), at a Board meeting.
- Advocate and promote the contribution of information to improve health and welfare outcomes.
- Identify and manage the risks that might affect the AIHW.
- Monitor the performance of the organisation against its Corporate Plan and Business Plan.
- Secure feedback from stakeholders on the use of AIHW products.
- Set remuneration for, and assess performance of, the Director.
- Review its own performance, including whether it has the appropriate skills among members to fulfil its functions.

Role of Chairperson (in addition to the role of the Board)

- Chair meetings of the Board and endorse associated processes.
- Play an extended role in managing formal relationship between the AIHW and the Minister.
- Manage significant issues between meetings of the Board.

- ♦ Manage the relationship of the Board with the Director of the AIHW.

Role of Director

- ♦ Provide leadership to the AIHW in policy and statistical issues across the scope of the AIHW's functions.
- ♦ Manage the affairs of the AIHW in accordance with the AIHW Act and the CAC Act.
- ♦ Establish and maintain appropriate working relationships with the portfolio Minister and other Ministers whose portfolios include activities within the scope of the Institute.
- ♦ Establish and maintain appropriate working relationships with the portfolio department, other relevant Commonwealth, state and territory agencies, and associated Commonwealth–State forums.
- ♦ Liaise as required with non-government bodies associated with the functions of the AIHW.
- ♦ Ensure the AIHW provides, either directly or through collaboration with others, high–quality, timely information across the health and welfare sectors, and arrange the necessary financial resources to enable this.
- ♦ Ensure that the Board is properly advised on all matters.
- ♦ Ensure the security of data provided to the AIHW, and protect confidentiality and privacy in accordance with legislative and ethical standards.
- ♦ Develop the Corporate Plan and the Business Plan.
- ♦ Maintain a strong financial position of the AIHW.
- ♦ Attract and retain the committed, skilled staff needed to carry out the AIHW's functions.

Role of staff–elected Board member

- ♦ Is a member of the Board.
- ♦ Is a full member, with the same responsibilities as other members.

Role of other members

- ♦ Act in the best interests of the AIHW. If nominated by a stakeholder group, a member may act as a channel for that stakeholder's interests, but must act in the interests of the AIHW. (See also 'Conflicts of interests'.)
- ♦ Support the Chair and Director of the AIHW in decision making.
- ♦ Participate on Board committees established under section 16(4) of the AIHW Act.
- ♦ Provide input to the Board based on their knowledge and background.

Role of Secretary

- Provides advice and support to the Board.
- Is independent of the Director of the AIHW and staff when dealing with sensitive matters related to the Director's employment.

5. Relationships

With management

Management representatives are invited to attend Board meetings to provide information, but have no formal responsibilities.

With stakeholders

Stakeholders are important to the prosperity of the AIHW. The AIHW has responsibility to a wide range of stakeholders from the Minister to the whole community. Board members have an important role in establishing and nurturing sound relationships with the AIHW's stakeholders.

With staff

The Chair participates in key AIHW activities, notably the launch of *Australia's health* and *Australia's welfare*, and in developing the Corporate Plan and the Business Plan.

The AIHW Act places the employment and terms and conditions of staff under the control of the Director. The Board seeks to ensure the development and welfare of staff, and provides advice to the Director when considered appropriate.

6. Delegation of powers and actions

The Board delegates powers for the day-to-day operations of the AIHW to the Director (Section 27).

7. Board processes

Meetings

The AIHW Act stipulates that the Board shall meet at least once every 4 months. To enable the Board to guide the work of the AIHW, to fit in with the launch of biennial publications, to approve the financial statements, and the Annual Report, and to meet other deadlines, meetings are usually scheduled for March/April, June, September and December of each year.

On occasion, where issues are to be discussed by independent members only, for example commercially or personally sensitive issues, the Chair may excuse from discussion the Director, the staff member, and departmental representatives.

Agenda and papers

The Director, in consultation with the Chair, formulates the agenda. Any Board members may submit items.

The Secretary of the Board sets a standard format for papers. Papers are developed by the Director in consultation with AIHW Group Heads.

Group Heads are responsible for providing papers to the Secretary 2 weeks before the meeting.

Papers are distributed electronically and in hard copy to members at least 1 week before the meeting.

The Board will consider late papers with the approval of the Chair.

Confidentiality

All papers for Board meetings are considered to be 'Board in Confidence' unless otherwise decided by the Board. Members and staff attending meetings, or having access to papers, are responsible for maintaining the confidentiality of discussions and papers.

Although departmental members may be supported by seeking adequate briefings from their departmental staff officers, to protect their confidentiality the full set of papers is not to be distributed throughout the department. Where members require briefings on certain items, only the paper covering the item in question may be forwarded to relevant staff within their respective agencies. These papers may not be used for any purpose other than that for which they are intended.

The AIHW will make available records of endorsed minutes to its staff.

The staff-elected member may make available notes on the outcome of issues following a Board meeting, in accordance with agreed release practices.

Minutes

The secretariat notes on the meeting are provided to the Chair directly following the meeting.

The Board Secretary and secretariat staff are responsible for taking the minutes and producing a draft document for clearance by the Chair before circulation to all members. The minutes should reflect the major decisions from the meeting. Where it is appropriate to do so, a brief background or notes from the discussion may be recorded to provide a more accurate picture of the proceedings.

The minutes of each meeting are endorsed at the subsequent meeting of the Board. Following endorsement, the Chair signs the minutes, which are retained for the official record and are subject to audit scrutiny.

Conflicts of interests

The CAC Act requires Board members to disclose their interests relevant to AIHW's functions, and not participate in decisions where a conflict is declared. Members who consider that they may have an interest in the matter shall:

- ✦ disclose the existence and the nature of the interest as soon as they become aware of the conflict
- ✦ provide details of the interest as requested by other members to determine the nature and extent of the interest
- ✦ remove themselves physically from the room, if appropriate, while the discussion takes place, unless the Board determines otherwise.

In some cases, Board members could be representing potential purchasers or competitors of the AIHW with regard to contract work. In such cases, members should declare their interest with regard to particular agenda items. The members may be present for discussion of the item with the agreement of the Board, but not for the decision making.

Conflict of roles

The Auditor-General has identified that the presence of government officers on the boards of statutory authorities may give rise to a conflict of roles, and has issued advice as follows (adapted to AIHW circumstances):

- ✦ The portfolio Secretary, as a member of the Board, is simultaneously:
 - chief policy adviser to the Minister for Health and Ageing and can be expected to oversee the AIHW's compliance with government policy objectives
 - a customer of the AIHW as service provider
 - a Board member expected to pursue the interests of the AIHW.

If it is considered necessary for the portfolio Secretary to be excluded from sensitive discussions, such as those concerning forthcoming budget strategy, the Secretary may offer advice and then leave. Relevant papers should not be forwarded on such items.

Concerns by the Secretary as a customer of the AIHW will be pursued through an outside stakeholder–consultation process and brought to the attention of the Board as necessary.

In relation to the Australian Statistician, it has been agreed with the Statistician that his or her agreement to an AIHW survey at the Board will constitute his or her agreement under section 5(1)(a) of the AIHW Act, provided he or she has had adequate notice of the proposal.

Decisions taken

Decisions of the Board are reached generally on a consensus basis. Decisions are recorded in the minutes.

Sections (5)(d) and (e) of the AIHW Act stipulate that 'all questions shall be decided by a majority of the votes of the members present' and 'the member presiding has a deliberative vote and, if necessary, also has a casting vote'.

Quorum

A quorum is the majority of members at the time of the meeting (section 15(5)(c)).

Members may provide the Chair with their endorsement or otherwise of a recommendation if they are absent for discussion of a particular item.

If the Chair is absent, the members present shall appoint one of their number to preside.

Remuneration and travel

In accordance with the AIHW Act members who are not Australian Government, state or territory employees will be paid remuneration as determined by the Remuneration Tribunal.

The AIHW makes all travel and accommodation arrangements where necessary. Flights are booked according to the best fare available.

The AIHW pays for accommodation and meals where members are required to stay overnight, and will pay for any appropriate and necessary incidental expenses.

Ensuring continuous improvement

The Board will review its performance each year. Issues reviewed may include its success in pursuing AIHW's objectives, procedural matters, protocol and clarity of roles and individual performance.

Induction

New members will be provided with a package including instructions and operations of the Board, and various relevant reading materials published by the AIHW.

Professional development

The Chair may seek professional development opportunities relevant to the operations of the Board.

Indemnity of members

The AIHW provides appropriate indemnity for Board members.

Complaints and dispute resolution

Complaints, including complaints about decisions of the Ethics Committee, are to be referred to the Secretary to the Board in the first instance. The Director will advise the Chair on effort to resolve the complaint by mediation. If the complaint cannot be resolved in this way, the Chair may decide on an appropriate mediator to determine the complaint or dispute. The Chair shall advise the Board of any such actions, and the outcome. Disputes remaining unresolved after such a process will be referred to the Board for resolution.

8. Board committees

Ethics Committee

The AIHW Ethics Committee is established under the AIHW Act and has the power to release identifiable data for research purposes. The AIHW is keen to fulfil its function of assisting research and analysis of the data it collects. It recognises that an unduly restrictive data release policy is contrary to the public interest. In recognising these issues, the AIHW is also aware of its legislative responsibility to protect the confidentiality of the information it receives, to respect the privacy and sensitivity of those to whom it relates, to maintain high-level data security procedures and, where appropriate, to incorporate the requirements of its information providers in those procedures.

The Committee considers the ethical acceptability of proposed applications and advises the Board as to whether projects satisfy the criteria developed by the Committee. Through the Committee Secretary, it monitors existing projects annually, and maintains a register of applications for projects. The Committee provides a yearly report of its operation to both the Board for inclusion in the Annual Report and also to the NHMRC for its reporting purposes.

The outcomes of meetings are reported to Board meetings by way of a written summary. At least once a year the Ethics Committee Chair is invited to a Board meeting to discuss issues related to the work of the Committee.

Committee membership is prescribed by legislation and is consistent with the guidelines established by the National Health and Medical Research Council for Human Research Ethics Committees.

Members of the Committee are appointed by the Board for a period of 3 years.

Audit and Finance Committee

The Audit and Finance Committee is established to:

- ensure the Internal Auditor fulfils the responsibilities required
- approve the strategic, financial and data internal audit plans and annual audit work programs

- ♦ consider issues arising from audit reports and monitor and evaluate management's response and action on those reports and recommendations
- ♦ review the AIHW's financial position and review quarterly financial reports in a form specified by the Committee
- ♦ ensure the timely tabling of the Annual Report before the Board
- ♦ report to the Board on any matters arising from either the internal audit or the external audit functions that it is considered necessary that the Board be informed about
- ♦ carry out, or cause to be carried out, any investigation of any matter referred to it by the Board
- ♦ meet with the external auditor annually
- ♦ advise the Board on delegations and performance
- ♦ oversee the risk management strategy and advise the Board accordingly.

Membership comprises the Board Chair and three non-executive members of the Board, one of whom is appointed as Chair of this Committee. Members are appointed for a term fixed by the Board, but for a period of not more than 3 years.

The AIHW's Director and relevant staff attend meetings by invitation.

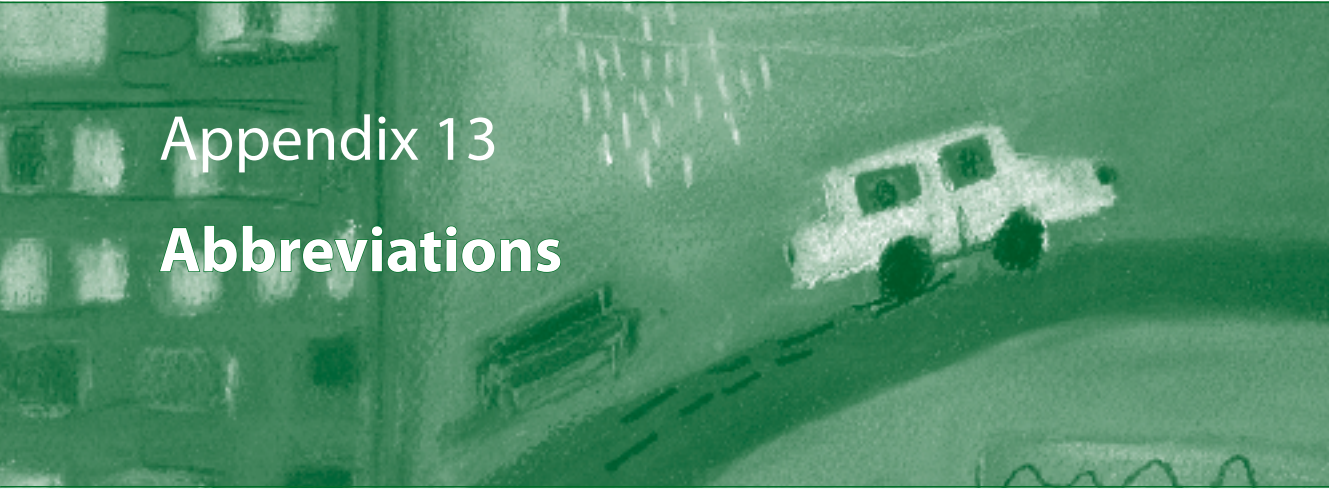
Although the Committee is required to report to the Board on its activities every six months only, the accepted practice is that a meeting is held before each Board meeting. This ensures that the Board is fully briefed on the financial and budgetary issues before it considers each quarterly financial report.

Remuneration Committee

The Remuneration Committee advises the Board on the remuneration of the AIHW Director.

The Remuneration Committee provides performance feedback to the Director and considers an annual review of remuneration—that is, an appropriate percentage increase in total remuneration and an appropriate level of performance pay. The Committee works within guidelines issued from time to time by the Remuneration Tribunal.

Membership currently comprises the Board Chair, the Chair of the Audit and Finance Committee and one other Board member.



Appendix 13
Abbreviations

ABS	Australian Bureau of Statistics
ACAM	Australian Centre for Asthma Monitoring
ACFADD	Advisory Committee on Functioning and Disability Data
ADPS	Adult Dental Programs Survey
AGPSCC	Australian General Practice Statistics and Classification Centre
AHCAS	Australian Healthcare Agreements
AHMAC	Australian Health Ministers' Advisory Council
AIHW	Australian Institute of Health and Welfare
AIHW Act	<i>Australian Institute of Health and Welfare Act 1987</i>
ANIHI	Agreement on National Indigenous Housing Information
ANZARD	Australia and New Zealand Assisted Reproduction Technology Database
APS	Australian Public Service
ARCPOH	Australian Research Centre for Population Oral Health
ATC/DDD	Anatomical, Therapeutic, Chemical Classification System with Defined Daily Doses
BEACH	Bettering the Evaluation and Care of Health
CAC Act	<i>Commonwealth Authorities and Companies Act 1997</i>
CATI-TRG	Computer-Assisted Telephone Interviewing Health Surveys Technical Reference Group
COAG	Council of Australian Governments
CSHA	Commonwealth-State Housing Agreement
CSMAC	Community Services Ministers' Advisory Council
CSTDA	Commonwealth-State/Territory Disability Agreement
DoHA	Department of Health and Ageing
DSRU	Dental Statistics and Research Unit
DVA	Department of Veterans' Affairs

FaCSIA	Department of Families, Community Services and Indigenous Affairs
GRIM	General Record of Incidence of Mortality
HDSC	Health Data Standards Committee
HMAC	Housing Ministers' Advisory Council
ICD-10-AM	International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification
ICF	International Classification of Functioning, Disability and Health
ISO	International Organization for Standardization
L&D	Learning and Development
NAGATSIHID	National Advisory Group on Aboriginal and Torres Strait Islander Health Information and Data
NCCH	National Centre for Classification in Health
NCHECR	National Centre in HIV/AIDS Epidemiology and Clinical Research
NCPASS	National Child Protection and Support Services
NCSDC	National Community Services Data Committee
NCSIA	National Community Services Information Agreement
NCSIMG	National Community Services Information Management Group
NDN	National Data Network
NEHTA	National E-Health Transition Authority
NHDA	National Housing Data Agreement
NHDAMG	National Housing Data Agreement Management Group
NHDDC	National Housing Data Development Committee
NHIA	National Health Information Agreement

NHIG	National Health Information Group
NHMRC	National Health and Medical Research Council
NHPA	National Health Priority Area
NIHIIC	National Indigenous Housing Information Implementation Committee
NISU	National Injury Surveillance Unit
NMDS	national minimum data set
NPHIWG	National Public Health Information Working Group
NPSU	National Perinatal Statistics Unit
OECD	Organisation for Economic Co-operation and Development
OH&S	occupational health and safety
SAAP	Supported Accommodation Assistance Program
SIMC	Statistical Information Management Committee
SIW	Structural Issues in the Workplace
WHO-FIC	World Health Organization Collaborating Centre for the Family of International Classifications

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